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ABSTRACT

This report examines five programs that use peer support groups as the key element of their prevention or intervention efforts in preventing or reducing the incidence of substance abuse, school failure, and other problems of adolescence. Chapter 1 provides introductory material. Chapter 2 contains background information on the peer program movement. Chapter 3 summarizes how the five study sites were selected and how data were collected at those sites. Chapter 4 gives detailed information on the following selected study site programs: Student Assistance Program; Louis Armstrong Manhood Development Program; Peer Group Connection; MELD Young Moms; and Twelve Together. Chapter 5 examines the resources and levels of support necessary to run a peer program, such as staffing, levels of facilitator training and supervision, and the use of community resources and referral networks. Chapter 6 examines the extent to which the programs are successful in fostering group processes and explores the inner mechanisms of the support groups within them, as well as the extent to which peer influence is generated within their meetings. The final chapter summarizes the findings on the effectiveness of peer support groups; identifies the most promising applications; and offers recommendations for the selection, training, and supervision of effective facilitators. (Contains 30 references.) (GLR)

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Comparative Case Studies of Five Peer Support Group Programs

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I. INTRODUCTION

The developmental stage known as adolescence is marked by numerous tasks that are important for successful transition to adulthood. These tasks include the acquisition of identity and values; the development of adult competencies, such as problem-solving and decision-making; the development of skills needed for social interaction; and the negotiation between the pressure to achieve and the pressure for acceptance by peers (Dryfoos, 1990).

For a significant proportion of adolescents, completion of these tasks is blocked by such problems as school failure, substance abuse, delinquency and teen parenthood--problems that can disrupt, delay or permanently derail successful maturation into adulthood. The long-term consequences can be devastating to these youth, severely limiting their chance for a productive life by increasing the likelihood that they will face unemployment or low-wage jobs, welfare dependency, medical and mental health problems, and problems with interpersonal relationships.

The problems are particularly common and severe among youth who live in low-income areas. According to William Julius Wilson (1987), "the isolation of low-income neighborhoods--where relatively few working adults reside, where youth gangs are especially strong and where the perils of substance abuse take an enormous toll--leave at-risk youth in greater danger with fewer supports than their counterparts in more affluent circumstances."

The past 15 years have seen a proliferation of programs incorporating peer-based strategies in their efforts to prevent or reduce the incidence of substance abuse, school failure and other problems of adolescence. While several studies have examined these programs in general, none have differentiated among the types and models of peer programming to examine which yield the best results. Thus, in spite of the prevalence of peer programs that address a wide variety of problems and issues, little is known about their implementation or effectiveness.

One peer-based strategy that seems particularly promising involves the use of peer support groups to guide youth toward more productive ways of coping with daily pressures and problems. Facilitated by an adult, peer leader or both, peer support groups attempt to promote positive peer influence among youth by having them meet and discuss issues in their lives on a regular basis.

An investigation of peer support group programs complements P/PV's adult/youth relationships research agenda by allowing us to observe a different type of relationship-based intervention for at-risk youth. For example, unlike mentoring programs, which must mobilize large numbers of adult volunteers to work individually with youth, peer group programs can reach large numbers of youth with the supervision and support of

relatively few adults. In addition, the focus on group interaction deemphasizes the "dating" aspect of one-to-one initiatives, stressing instead a group process that aims to reinforce prosocial attitudes and behaviors. Finally, peer group programs meet the developmental needs of youth by providing support from those relationships that youth tend to value most highly--those with their peers.

To investigate the promise of this approach, this report looks at five programs that use peer support groups as the crux of their prevention or intervention effort. The programs selected represent a range of goals and organizational features that reflect the diversity of the field of peer support group programming.

The report is structured as follows: Chapter II provides background on the peer program movement. Chapter III summarizes how the five study sites were selected and how data were collected at those sites. Chapter IV gives detailed information on the selected study sites.

Chapters V through VII present findings and conclusions based on a cross-site analysis that allowed us to focus on the following issues:

- What resources, levels of support, and infrastructure are needed to implement a peer support group program effectively? What levels of staffing are needed? What levels of training and supervision are needed to develop the facilitators' ability to generate discussion and support within the group? To what extent are community resources, such as referral networks, utilized by these programs?

- Are the programs successful in generating support and positive peer influence within the group? Like adult/youth relationship programs, peer programs are built on a model of early disclosure of personal issues. Are youth willing to talk about their problems and concerns within the group? What initial efforts are needed to promote and sustain the level of trust that can allow for this? What is the nature of peer interaction within the support groups, and to what extent is positive peer influence the engine that drives these programs? How do such factors as group composition and facilitator behavior affect this peer dynamic? What role does the facilitator play within the group? Do peer-facilitators play a different role than adults as group leaders?

- In what ways do youth benefit from participating in the programs? What do youth feel they gain? How effective are the programs in preventing or reducing the specific problem which they have been designed to address? Are there other ways in which youth benefit--e.g., by developing better coping skills or greater self-esteem?

In addressing these questions, considerable attention was paid to the relative merits of peer and adult facilitators. In addition, in looking at programs representing four different

problem areas, we tried to ascertain whether peer support groups seem more useful in addressing some problems than others.

II. BACKGROUND

The recent proliferation of peer programs stemmed from a growing recognition of the importance of the peer group in shaping adolescent values and behavior and the need to harness this powerful peer influence.

Peer relationships, while important to development during early and middle childhood, take on increasing importance as youth move into adolescence and begin to establish their own identities and independence. At this point, they become a major context for adolescent socialization, identity formation, the development of values and behaviors, and emotional support (Search Institute, 1987; Brown, 1990; Benard, 1990). During adolescence, teenagers turn increasingly to peers rather than parents for information (Norem-Hebeisen and Hedin, 1988), support in times of stress (Fenzel and Blyth, 1986), and advice on personal problems (Sebald, 1989). While parents continue to provide youth with guidance in establishing long-term goals, peers are more likely to influence youth in such areas as dating, dress, and recreational activities (Savin-Williams and Berndt, 1990; Sebald, 1989).

The negative side of peer influence has been well-documented. For example, several studies have concluded that the most consistent and reliable predictor of adolescent substance abuse is whether an adolescent's friends and close associates engage in or condone substance abuse (Norem-Hebeisen and Hedin, 1988; Brown, 1982; Dryfoos, 1990, Coombs, 1991). The same is true for juvenile delinquent behavior: association with deviant peers has been identified as the strongest predictor of adolescent arrest records, self-reported delinquent behavior, and recidivism in several studies (Hanson et al., 1984; Fagan and Wexler, 1987; Grenier and Roundtree, 1987; Dishion and Loeber, 1985).

Peer influence is found to be a strong and consistent factor affecting a wide range of educational outcomes as well (Ide et al., 1981). If the prevailing norms of the peer group do not value--or in fact deride--educational achievement, a powerful negative influence can be exerted on members' academic behavior. There is evidence that within some African-American peer cultures, school is perceived as a symbol of white society, and African-American students who do well in school run the risk of being ostracized by their peers for "acting white" and rejecting their culture. In such a situation, status within the group is gained by rejecting the achievement-oriented norms of society (Fordham, 1988; Fordham and Ogbu, 1986; Ogbu, 1990).

Less well-documented is the positive influence that peers can exert on one another. Theorists have suggested that friendships or other peer associations can enhance an individual's ability to cope in the face of a variety of transitions and adversities (Berndt, 1989). Clasen and Brown (1985) found that within some high school peer crowds, peer norms favor academic achievement and sanction substance abuse and similar behaviors.

TYPES OF PEER PROGRAMMING

Peer-based programs attempt to maximize the power of peers to exert a positive influence on youth by fostering peer-generated norms that discourage youth from engaging in high-risk behaviors and encourage them to make healthy life choices.

While peer support group programs are the sole focus of this study, these initiatives represent only a small portion of the peer programs currently being implemented across the country. Indeed, the field has become so wide and diverse that five broad categories of programs can be identified:

- Peer support programs, emphasize group interaction among peers and the positive potential of peer influence within the group. Small discussion groups, which meet for a specified number of sessions, are a central component of such programs.

- Peer teaching programs use peers to convey information and skill training, including basic literacy skills, positive health practices, and refusal skills.

- Peer counseling programs focus on the role of youth as providers of assistance to other youth. Often, peer counselors maintain "office hours" when youth can drop in to discuss personal problems.

- Peer theater troupes train young performers to enact the situations faced by adolescents in their everyday lives. These performances are often followed by audience question-and-answer sessions.

- Peer participation programs give youth the responsibility for planning, delivering or evaluating services intended for their peers. These programs typically involve older adolescents as members of advisory boards. (Resnik and Gibbs, 1988; Partnership for Youth Leadership, 1991).

REVIEW OF PAST PROGRAM EVALUATIONS

Our review of evaluations of programs using peer support groups to promote prosocial behavior and other positive outcomes indicates that peer programs appear to be a promising approach in general. For a number of reasons, however, existing evaluations do not provide sufficient information specifically to assess the potential impact of the peer support group.

First, evaluations of programs that provide services in addition to peer support groups generally do not report the extent to which the peer support group itself is responsible for program-related gains. And other studies discuss results from several different types of peer programs without indicating the relative effectiveness of each type.

Still, a number of studies qualify as instructive. Because of the prevalence of peer strategies in substance abuse prevention programs, meta-analyses involving a number of such programs have been conducted. In the most frequently cited example, Tobler (1986) broadly defined peer programs as one of five program strategies for her meta-analysis. In comparing the effects of the five program types, Tobler found the impact of the peer programs to be stronger and more positive than that of the other approaches, especially in changing actual behavior (as opposed to knowledge and/or attitudes, which may or may not result in behavioral change). However, because Tobler's categorization embraced many different types of peer-based programs, including those that teach specific social skills (e.g., resisting negative peer influence), without using a peer influence model (i.e., using the youth themselves as the major program resource), her review sheds little light on the effectiveness of peer support groups.

Evaluations of individual adolescent pregnancy prevention and juvenile delinquency prevention programs that use a peer-based approach similarly report promising findings, though they also are uninstructive on the specific effectiveness of peer support group strategies. Two studies of pregnancy prevention programs using adult-led discussion groups report lowered rates of pregnancy and greater use of contraception and safe sexual practices (Blythe et al., 1981; Zabin et al., 1988). However, these programs are not based on a peer influence model, but instead focus on providing youth with information in small-group settings.

Other studies of peer programs raise two issues that are central to the strategy of peer support groups. The first is the composition of the peer group. Feldman et al. (1987) evaluated the St. Louis Conundrum, a peer-based intervention program for juvenile delinquents that includes peer discussion groups (similar to support groups) as one of several peer-based strategies. The study suggests that groups composed of both delinquent and non-delinquent youth tend to show greater gains than groups composed entirely of delinquent youth. In the mixed groups, the non-delinquent peers seemed to generate prosocial norms, which subsequently influenced the delinquent youth; in the delinquents-only group, the youth espoused norms that were essentially antisocial, thus reinforcing their antisocial behaviors rather than positive alternative behaviors.

A second issue is the importance of the group facilitator. Feldman et al. (1987) found the facilitator to be an influential variable, and theorized that the facilitator indirectly influences the youth by manipulating peer processes within the group. They noted that in groups led by adult facilitators adept at generating "therapeutic" group processes, delinquent youth made greater gains than did their counterparts in groups whose leaders were not skilled in this way.

Eggert and Herting (1991) went a step further, reporting that the impact of the facilitator is more important than that of the peer group. Their study, which compared the relative influence of peer group support and facilitator support, examined a school-based peer support group program designed to reduce substance abuse among high-risk youth. They

found that while skilled facilitators were able to generate positive peer support within a group, the support they gave youth directly had the greatest effect on substance abuse.

It is important to note that Eggert and Herting's study focused solely on groups that were composed entirely of high-risk youth--a key factor if the aforementioned report by Feldman et al. is correct. Their findings may reflect that while these youth supported each other, only the facilitator represented anti-substance abuse norms and thus would be the more important agent of change.

Also under consideration in our literature search was Bangert-Drowns' 1988 review of 33 well-designed evaluations of school-based substance abuse education programs. While this review reiterated the importance of the facilitator, it suggested that programs led by peer facilitators appear to be more successful than those led by adults.

Additional research is necessary to determine the impacts of peer-based interventions in specific problem areas, such as substance abuse, adolescent pregnancy, juvenile delinquency and dropping out of school. Studies should be designed to indicate whether the peer support group component contributes to overall program effects and whether that varies by problem area. Research is also necessary to clarify when an adult facilitator will be more appropriate than a peer leader. In addition, since many peer group programs place youth with similar problems together because of their shared experiences, studies are needed to assess whether mixed or homogeneous groups would be most effective for these problem areas.

III. SITE SELECTION AND DATA COLLECTION

In order for P/PV to investigate the potential of peer group programs as a prevention or intervention strategy, an intensive information-gathering effort was conducted to identify promising programs. An equally intensive data collection process then ensued at the five selected program sites. This chapter discusses how we proceeded on these two efforts.

SITE SELECTION

Information on prospective study programs was collected in a number of ways. First, a search of the research literature was conducted. Organizations knowledgeable about peer-based programs were contacted for information; these included the Center for Early Adolescence, the National Center for Service Learning in Early Adolescence, the Office of Substance Abuse Prevention, The Child Welfare League of America, the National Dropout Prevention Center, and the National Organization of Student Assistance Programs and Partners.

Based on the results of this review and on what was previously known by P/PV staff, operators of promising programs across the country were interviewed by telephone concerning the purpose, participants, and components of their programs. In addition, P/PV staff attended a national conference sponsored by the National Peer Helpers Association, a professional organization dedicated to encouraging, promoting and improving peer helper programs. At this conference, P/PV staff met with program operators and learned of additional programs across the country.

This intensive inquiry yielded information on approximately 100 peer group programs across the country. Given P/PV's interest in exploring the impacts derived from participating in programs that are sustained in nature and emphasize the formation of interpersonal relationships, programs included in the study had to meet the following criteria:

- Peer interaction had to be an integral part of the program, not secondary to delivering a "hard service," such as academic instruction or specific skill-building. Additionally, in the stated program goals and the descriptions of program activities, peers had to be conceptualized as resources to serve as examples and role models for one another; to teach and learn from each other by sharing experiences, expertise, knowledge, advice, and encouragement.

- The support/discussion groups must be maintained over time, since we believe that only through sustained interaction and repeated meetings can a group dynamic be established and can peer relationships form.

Approximately 20 of the 100 programs in our sample met these criteria. They could be grouped by two critical features: the major problem area addressed by the program, and whether the support groups are facilitated by peers or by adults. The programs also had a wide variety of administrative contexts. While the limits of the present study preclude definitive conclusions, we felt that including programs that varied on these dimensions would enable informative comparisons.

Problem Area

Including programs with different prevention/intervention goals would allow exploration of the operational needs and relative effectiveness of peer support group programs across a range of problems and youth populations. Thus, among the many issues that peer support group programs address, programs viewed as candidates for inclusion in the study were those that focused on one of the following problem areas: substance abuse, teen parenthood and its consequences, school failure or delinquent behavior. These four problem areas were chosen because they have serious, and sometimes devastating, long-term consequences for youth, their families and society as a whole, and because the incidence of these problems continues to rise despite years of intensive program efforts. In addition, both primary prevention efforts aimed at preventing the onset of the problem and intervention efforts for youth already experiencing the problem were considered.

Peer- and Adult-led Models

The programs we identified used two basic support group models: adult-facilitated and peer-facilitated. In the adult-facilitated model, one or two adults are paired with a group of youth. The adults structure and direct regularly scheduled group meetings, in which they lead youth in discussions and exercises intended to promote positive peer influence. There is a great variation in the background and experience programs seek in adult facilitators. Some programs use volunteers from the community, and others specifically seek volunteers who have themselves overcome the problems the program seeks to prevent. Other programs use highly trained professionals with experience working with adolescents, such as social workers or teachers.

In the peer-facilitated model, programs provide peer leaders with intensive training in communication, leadership, and group facilitation skills. These programs seek positive benefits for both the peer leaders and the youth who participate in the peer-led support groups.

Because both models were included in this study, we can explore their relative merits as well as the differences in the levels of supervision and training each require.

THE STUDY SITES

To gather further information on program specifics, a mail survey was sent to the 20 finalist sites. The following five programs were then selected:

- The Student Assistance Program (SAP), Schenectady NY, a school-based substance abuse prevention/intervention program serving middle and high school students. The program arranges peer support groups facilitated by a professional counselor for youth who have or are at risk of developing substance abuse problems.

- Twelve Together (12 Together), Detroit MI, a community-based dropout-prevention program serving ninth-grade students. Peer support groups are facilitated by community volunteers.

- Meld Young Moms (MOMS), New Britain CT, a community-based intervention program for pregnant women and new mothers in their late teens and early 20s. Peer support groups are facilitated by women who were teen moms themselves.

- The Louis Armstrong Manhood Development Program (LAMDP), New Orleans LA, a community-based program for African-American males aged 8 to 16 that offers a violence-prevention peer group facilitated by a professional counselor.

- The Peer Group Connection (PGC), Princeton NJ, a school-based program for incoming freshman students whose goal is to ease the adjustment to high school and prevent school failure. Peer support groups are facilitated by trained high school senior peer leaders.

More detailed site information can be found in Chapter IV.

DATA COLLECTION

Each program was visited once by P/PV staff--with the exception of 12 Together, which was visited on two occasions. Each site visit lasted two days, and featured interviews with the program director or coordinator, two group facilitators (with the exception of the LAMDP, where one facilitator was interviewed), and one to three youth participants. At each site, a group meeting was observed and a variety of printed material and program records were collected. Collected material included program brochures, application forms, facilitator training manuals or syllabi, curricula for the group meetings, and third-party evaluation reports.

Following each site visit, the gathered information was distilled into a full description of the program. A cross-site comparison of the five programs was then conducted, highlighting similarities and differences across the programs, as well as identifying a set

of "best practices" that could be adopted by program developers seeking to incorporate peer support groups into their program. This cross-site analysis will be explored in a later chapter.

LIMITATIONS OF THE STUDY

Our goal was to examine the promise of peer support groups for a range of youth problems. Given the preliminary nature of this study, our decision to include five problem areas limited the depth with which we could examine any one program. In particular, our time on site was limited to a single two-day visit to each program. Since most support groups met only once a week, we were able to observe only one group meeting in each program (with the exception of PGC, whose proximity to Philadelphia allowed us to extend our site visit to include a second observation).

This created the possibility that the session we observed was atypical of group meetings in the program. This possibility is exacerbated by the variation within each program. Programs use a variety of activities in their group meetings, and different activities generate different levels and types of peer interaction. Thus, we may have observed a session on a day it was conducting an activity that required relatively little group interaction.

In addition, the literature on group dynamics indicate that groups pass through a series of "stages" in their life cycle, each of which is characterized by a different type of interpersonal dynamic. Our single observation precluded our observing a group over time to get a better idea of how peer interaction evolved over the course of the program.

In short, our "snapshot" approach precluded our getting a sense of interaction within that group over its range of activities and group stages. We tried to counteract this limitation in two ways. First, at each site we asked youth, facilitators, and program staff to describe a typical meeting, so we could ascertain the extent to which the observed meeting deviated from the norm. Second, our cross-site analysis allowed us to combine observations of six support group meetings. Thus, while we do not wish to make definitive statements regarding the levels and kinds of peer interaction that occur within any one program, we believe we are able to draw preliminary conclusions regarding the internal mechanisms of peer support groups in general.

IV. PROGRAM DESCRIPTIONS

STUDENT ASSISTANCE PROGRAM (SAP)

The Student Assistance Program (SAP) is a school-based prevention and early intervention substance abuse program for youth in the sixth to 12th grades. Started in 1984, it is based on a model originally developed by Ellen Morehouse that has been replicated nationwide.

SAP is one of several programs in the Chemical Abuse Prevention Intervention Team (CAPIT), which coordinates prevention and intervention services in the Albany-Schoharie-Schenectady tricounty area of New York. CAPIT is administered by the regional Board of Cooperative Educational Services (BOCES), a statewide entity. Half of SAP's funding comes from the New York State Office of Alcohol and Substance Abuse; individual school districts provide the other half, but are reimbursed for approximately half their cost by New York State. The program costs $66,000 to run in each school; the estimated average cost per youth is $260.

SAP's primary purpose is to prevent drug and alcohol problems among students who are at high risk of substance abuse--especially children of substance abusers, and current or previous substance abusers. A broader mission is to identify and intervene with students experiencing a wide range of family, social, emotional and behavioral problems.

In Schenectady County, 859 students--10 percent of the student population--received SAP assessment and counseling services during the 1991-1992 academic year. Reflecting the community demographics, 93 percent of these participants were white. However, females outnumbered males two to one. More than half of the students served (56%) had some type of chemical dependency problem: they and/or their parents were abusers or former abusers.

The SAP is currently implemented in 12 schools in the tricounty area. Services in each school are delivered by an SAP counselor who works full time in that school (with the exception of one counselor in a small rural school who is employed part time). All counselors are licensed social workers with a master's degree; in the year of this study, all were female and one was African American. Two clinical supervisors, based at the regional BOCES office, supervise the counselors.

The counselors provide a wide range of services: individual assessment and counseling; group counseling (i.e., support groups); referrals; crisis intervention and mediation; consultations; and presentations on substance abuse-related issues. After assessing each referred (or self-referred) student, the SAP counselor recommends the student to individual counseling and/or a support group within the school, or to services in the community.

The substance abuse intervention support groups are composed of five to 12 peers and one counselor, and meet weekly for 50 minutes during school hours. Group members receive passes that excuse them from their regular class. While the cycle for any one support group is from three to eight weeks, groups can have multiple cycles, and students have the option of reenrolling. However, once a group forms, no new members are allowed until the end of the cycle.

The content of the meetings varies, but they usually include a chance for individuals to discuss personal problems or their progress in reducing their use of drugs and alcohol, and a group activity planned by the counselor. At times, the entire period is devoted to discussion of student problems. In addition, students have input on discussion topics, and a student-generated issue can override a planned activity.

Group activities include skits and role-plays with preplanned scenarios and problems to resolve; presentations by community service agencies specializing in substance abuse or older students who were former users; and viewing instructional videotapes. Activities are designed to build trust and cohesion within the group; provide information about various illegal and illicit substances and the consequences of their abuse; increase individuals' awareness of their past and current substance abuse-related behavior and levels of use; and improve their problem-solving, decision-making and coping skills. Students set individual goals, which may be written and posted so all can see. Students periodically report to the group on their progress.

According to the model, the facilitator plays an active, assertive role by providing structure for the meetings, containing emotions to a comfortable level, and guiding the group through the different phases of group dynamics. Youth should freely discuss personal problems and behaviors, challenge each others' substance abuse behavior rather than reinforce it, and support each other. An important group ground rule is that confidentiality be maintained.

LOUIS ARMSTRONG MANHOOD DEVELOPMENT PROGRAM (LAMDP)

The Louis Armstrong Manhood Development Program (LAMDP) is a community-based after-school program begun in 1988 that provides guidance and information to help boys become successful and responsible young men. LAMDP is housed in the Milne Boys' Home in New Orleans LA. Originally a home for orphan and destitute boys, then a residential facility for adjudicated male youth, Milne became a nonresidential facility in 1988 and has since served male youth primarily through the LAMDP as well as their families through the Family Preservation Program FOCUS.

The program operates under the auspices of the City Welfare Department, which administers the Milne Boys Home. Personnel and programmatic expenses are funded by the city and state. A trust fund established by Milne's benefactor provides funds for capital improvements. In 1992, program costs averaged $4,485 per participant.

LAMDP participants (called "brothers") are young, urban males, predominantly African American. In the Fall 1992 cycle, LAMDP registered 55 brothers (all African American), ranging from eight to 16 years old, with most clustered in the eight to 13 age range. Some brothers have been involved in delinquent acts; some have academic and/or behavior problems. Most come to the program because they come from single, female-headed households and lack positive male adult role models.

LAMDP is the only program in this study that offers multiple activity components. These components are: African cultural enrichment, violence prevention, substance abuse prevention, educational development (e.g., computer skills and reading), group counseling, homework assistance, recreation and the "Rite of Passage." The Rite of Passage stems from an African tradition in which boys approaching puberty leave their families to learn the art and skill of becoming men from the village male elders. In the LAMDP, brothers attain the Rite after reaching goals in the following areas: program participation (e.g., attendance, behavior and projects completed); academic performance; personal hygiene; and respect for elders, peers and self. When resources are available, there are also teen parenting, vocational education, and individual mentoring components.

Six professional staff (called "elders") are responsible for helping the brothers build self-esteem, self-awareness and self-discipline. Four staff members are male, and all are African American. Only two work full time with the program.

The program operates four days each week (Monday through Thursday) from 3:30 to 7:30 p.m., and occasionally on weekends. It follows the academic year with two cycles of roughly 10 weeks each, beginning in September and January. At least one parenting class is scheduled during each cycle for parents and guardians. Brothers may participate for more than one cycle, but usually cannot join the program once a cycle has begun. Average length-of-stay in the program is three years.

The first two to three weeks of the program are an orientation, during which brothers learn about the program's philosophy and goals, and determine whether they really want to join. Afterward, they are grouped by age and formally attend all the primary components with their group.

The violence and substance abuse components feature the peer support group format. There are four groups, two for each issue, with 10 to 12 participants grouped by age.

A typical hour-long peer support group meeting begins with the elder sharing information (e.g., a proverb or facts about violence), then asking the group questions related to that information. This initial interaction is designed to generate discussion.

Activities that might follow include role-playing preplanned scenarios, watching videos, playing games or reading books. These activities aim to teach verbal, decision-making,

and refusal skills, and to help the brothers reflect on their own experiences. The elders plan the activities, but there is no set curriculum. Brothers have no formal role in activity planning, but can make suggestions.

Brothers do not set individual goals for the violence prevention component per se, but do have goals to meet for the program overall. Most of these goals relate to achieving the Rite of Passage.

The peer interaction is intended to enable group members "to feel free to take risks and share opinions with each other and the elder(s)." One ground rule is acting with mutual respect; another is maintaining confidentiality.

PEER GROUP CONNECTION (PGC)

The Peer Group Connection (PGC) began in 1985 in Trenton Central High School in Trenton, New Jersey. Its goal is to ease ninth-graders' transition from middle school to high school and to encourage positive peer support.

The program trains high school seniors (and occasionally juniors) to work weekly with small groups of ninth-graders during the course of an academic year. It uses a model developed by the Princeton (NJ) Center for Leadership Training and replicated in more than 100 schools in six states.

Trenton Central High School serves 2,800 students, a majority of whom live in female-headed households with incomes below the poverty line. PGC is currently supported by the Board of Education. The 1992-93 budget of $117,000 includes the program coordinator's full-time salary and stipends of $5,000 for each faculty advisor. Based on the 1992-93 budget, the cost per student is $334.

The program's primary goals for both peer leaders and group participants are to provide positive peer pressure, to develop conflict resolution and decision-making skills, to build inter- and intrapersonal relationships, to accept responsibility for actions, and to hone leadership skills.

There were 18 peer groups in the three classes. Peer group members are mostly ninth-graders enrolled in first-, seventh- or eighth-period health, gym or swimming classes. In 1992-93, there were 350 ninth-graders, predominantly African American. Two classes were split fairly evenly by gender; the third class, for ROTC students, was predominantly male.

There were 39 peer leaders. The majority were African American; one leader was Pakistani and another was Hispanic. Excluding the ROTC class, there were 16 female and 10 male peer leaders.

The program also includes four faculty advisors, one of whom has primary responsibility for the entire program. Advisors are selected by the peer leaders and the program coordinator. In 1992-93, three advisors were African-American women and one was a white male.

Each group has 12 to 15 ninth-graders and two peer leaders. Meetings occur weekly for 50 minutes beginning in October and ending in late March. The peer groups also occasionally get together outside of school hours for ice cream and bowling parties, and other activities.

Peer group sessions involve activity games and role-plays/skits leading to discussions around a variety of issues that are of concern to adolescents, including substance abuse and male/female relationships, family conflict and peer pressure. Controversial issues, such as the Rodney King verdict, are also discussed.

The peer leaders plan the activities and discussion topics based on suggestions from the ninth-graders, parents and school administrators. For example, two recent topics raised by the group members dealt with the significant increase in fighting among girls at the school this year and an incident where a fellow student, who allegedly stole a car, drowned after being chased by the police. The groups talked about how they would have handled these situations.

The peer leaders' responsibilities during the session include choosing which group members will perform certain roles in an activity, conducting the activity and keeping control of the group. The faculty advisors observe the meetings, but do not participate. They give feedback to the peer leaders every Friday during the peer leadership class.

Each session ends with a closure activity selected by peer leaders based on how the meeting went. If there was a heated debate, the leaders might end with a closure to cool tempers and reinforce group bonding.

According to the program's design, the peer leaders should facilitate discussion on any issue raised, and encourage the group members to collectively work through problems. Confidentiality must be maintained by everyone, but when serious matters arise, such as suicidal thoughts, abuse, incest or weapons use, peer leaders must inform the faculty advisors and other appropriate authorities.

MELD[1] YOUNG MOMS (MOMS)

The MOMS program in New Britain CT is a community-based intervention program that provides information and support in a peer group format to pregnant women and new

[1] The Minnesota Early Learning Design.

mothers between the ages of 12 and 22. The program is based on a national model developed by Ann Ellwood in 1975 and replicated in 18 states. The MOMS program began at New Britain General Hospital in 1986 as a project of the local Junior League.

Administration of the program occurs at the hospital. The budget for the 1992-93 fiscal year is $42,915, most (86%) of which come from the state of Connecticut, with the remainder coming from a private grant. Local community organizations donate amenities, including the meeting space, food, and transportation and child care services. These donations are estimated at $34,462. The average cost per program participant is approximately $1,341.

The primary goal of the MOMS program is to empower young women to make responsible choices for themselves and their children. Through the program, young women receive social support, encouragement, and information to guide them in their transition to parenthood. The program's secondary goals include imparting information on the stages of child development and preventing child abuse and second pregnancies.

According to the model, a MOMS group should stay together for two years, meeting in a pattern of 10 weekly sessions followed by two-week breaks. Participants receive door-to-door transportation to the meeting site, typically a church basement, where they meet for up to three hours in the evening. A warm meal and child care services are also provided, as are referrals to state public assistance agencies, shelters, and counseling agencies.

The three MOMS groups in New Britain enroll a total of 32 young women. Each group is racially mixed, with African-American, white, and Puerto Rican women. The participants of the MOMS group observed for this study are graduates of previous groups who advocated for a second two-year cycle for themselves; they are in their early 20s. Some are working, some are in school part time, and others are receiving assistance and taking care of their children full time.

While a part-time program coordinator oversees all three groups, each group is facilitated by two volunteers, at least one of whom is a former teenage mother. Facilitators are recruited from the community and receive a $15 stipend for each meeting. They are supervised by the program coordinator.

Groups range from eight to 15 members. Initially, facilitators suggest topics for the discussion session, but group members choose the topics once they have bonded. Group sessions can include any of the following activities: group discussions, videos, observations (e.g., of a maternity ward and delivery room), outside speakers, role-playing and holiday parties.

During the meetings, facilitators make sure things run smoothly by helping the young mothers analyze and process the information generated in the discussions so that they

can handle their own difficulties. Only when issues of child abuse or neglect arise do the facilitators intervene.

Young mothers provide advice to one another, inform one another about community resources, challenge one another about their behaviors, and provide follow-up reports on advice received from the group during previous meetings.

Each group develops a set of "norms" that are written and distributed to each member. Respecting confidentiality is the most important norm. Others include showing mutual respect and kindness, and starting no physical altercations. The young mothers themselves are responsible for enforcing the group norms.

TWELVE TOGETHER (12 TOGETHER)

Twelve Together is a preventive initiative that uses peer groups to provide youth who are at risk of dropping out of high school with the support and direction needed to overcome academic and personal problems. The program originated in Detroit and has been widely replicated across the U.S.

Begun in 1982, 12 Together is administered through the Metropolitan Detroit Youth Foundation (MDYF), a community-based organization involved in youth advocacy, education, and employment training services. MDYF currently provides all program funding, which totaled $60,000 for 1992-93, an average of $674 per participant.

The primary goals of the program are to improve the academic performance of the participants, to decrease their high school dropout rate, and to increase their self-esteem. However, provision of academic services is not the primary means by which the program's goals are attained. Instead, the program uses peer counseling in an effort to improve the problem-solving skills of youth in order to enable them to better resolve problems (e.g., family conflicts, substance abuse, teen sexuality and delinquency) that interfere with their academic achievement.

The program targets Detroit public school students who are making the transition to high school. As the program's name suggests, each peer group has 12 members. In order to promote positive peer influence, the program tries to include in each group a balanced mix of high-risk and other youth who feel they might benefit from the program. To be considered high-risk, a student must meet at least two of the following criteria: a single-parent household, low grades, and/or a high absentee rate. Most of last year's 89 participants were African American and most were male. About half were in the eighth grade, with the remainder in high school.

Volunteers from all over the community serve as the peer group facilitators. Teachers, social workers, bank managers, computer programmers, and even former participants

have all served as facilitators. Last year, there were 11 facilitators, four male and seven female. All but one were African American, and two were former participants.

The program begins with a weekend retreat for all participants and facilitators. The retreat is the first meeting for all groups, and serves as an orientation. Afterward, each group meets after school in space donated by local businesses. Meeting starting dates are staggered throughout the year from October to February, and the number of meetings varies--generally ranging from 17 to 22. Meetings continue to the end of the school year.

In addition to the weekly group meetings, the program components include a parent reception, academic forums on such topics as study skills and career awareness, and free academic tutoring.

The program has developed a series of steps to guide the process of group meetings. Meetings begin with each member briefly describing a problem s/he may have had during the week. The group then decides which problems to focus on, giving priority to the most serious concerns. Group members then ask questions designed to help the targeted individual identify the conditions of and accept responsibility for addressing his/her problem. After the group offers options to help the individual resolve the problem, he/she usually agrees to try out the most reasonable suggestion(s) and report the outcome(s) to the group at the next session. The meeting ends with the facilitator recapping the session and offering feedback.

As part of their pledge to support one another, participants are expected to report to the group about each other's behavior--good and bad--outside of the group. Members must also bring their report cards to the meetings and discuss their grades with the group. Consequently, keeping confidentiality is a golden rule among the group; if it is breached, the group can vote the guilty peer out of the group.

V. PROGRAM INFRASTRUCTURE

Peer support group programs must be built on an understanding of the needs and concerns of adolescents. Generating constructive and open discussion around these issues requires considerable skill and knowledge on the part of the group facilitator. Additionally, programs must have some way of responding to youth's needs that surface in the course of the group discussions and that exceed the scope of the program. This chapter examines the resources and levels of support necessary to run a peer program. Specifically, it examines staffing, levels of facilitator training and supervision, and use of community resources and referral networks.

THE PROGRAM COORDINATOR

All five programs hired a program coordinator to take overall responsibility for managing the program. The primary responsibility of program coordinators is to train and supervise the facilitators who lead the peer support groups. In addition, program coordinators serve as the liaison with the institution that houses the program, oversees program publicity, recruits facilitators, raises funds, accounts for program expenses, plans program activities, and handles logistical concerns, such as transportation. Because of the many responsibilities of program coordinators, they must be highly proficient in a number of areas.

PROGRAM FACILITATORS

Facilitators are responsible for leading the peer support groups, planning discussion topics and activities, and maintaining attendance and other program records. Among the four adult-led programs, facilitators have a wide range of backgrounds and experience, and include both community volunteers and trained professionals. Selection of the peer leaders for the PGC requires that high school seniors undergo a lengthy application and interview process to determine their ability to lead groups of freshmen.

Through the recruitment and selection process for facilitators, four programs attempt to minimize the social distance between facilitators and participants by selecting facilitators who are similar to participants in life experiences, cultural/ethnic background, age and/or gender. They do so with the belief that these similarities will help the facilitators understand the challenges facing program participants and increase youth's comfort in discussing personal issues.

The LAMDP, which serves black male adolescents, hired black male facilitators who are familiar with the participants' home environments and the types of situations they are likely to encounter in their neighborhoods. One facilitator from this program commented that "the opportunity to be a role model and give correct ways to get to manhood" was his reason for participating. 12 Together also recruited volunteers from

the same ethnic and geographic community as the students in an attempt to minimize cultural differences between facilitators and participants.

In each of its facilitator teams, MOMS included at least one former teen mother, in the belief that she will have lived through many of the participants' current experiences. One facilitator said she was motivated to volunteer because she remembered the difficulties she faced and how alone she felt as a teenage mother. Likewise, PGC is designed on the premise that adolescents are more likely to reveal certain things to peer leaders because they perceive near-peers as more receptive and understanding than adults.

SAP responds to a somewhat different set of requirements, reflecting its particular mission and target population. Operating within a state-funded public school system as a counseling program for youth experiencing serious problems, SAP seeks experienced professional counselors with graduate degrees in social work who can identify and deal with suicidal ideations, depression, eating disorders, and other serious clinical problems. However, the premium placed on hiring trained professionals does not prevent the program from seeking professionals who have experiences and backgrounds similar to those of the youth they serve.

Facilitator Training

Because the facilitators' role is crucial in determining what youth receive from participation, facilitator training is an important element of program success. All the programs provide training for facilitators. Explicit training in group dynamics and listening skills appears to be particularly necessary before facilitators--whether professional counselors, community volunteers or older peers--can effectively promote peer interaction in groups of adolescents that are often difficult to handle.

All programs except the LAMDP have intensive structured training sessions prior to placing facilitators with their groups. Three programs--PGC, 12 Together and MOMS--provide weekend training sessions, and one program--SAP--conducts a week-long training session. LAMDP has periodic training during the course of the year but does not require that all facilitators complete a standard training module before being placed with groups. LAMDP was the least successful program in fostering interaction among peers, which may be partly attributable to this lack of structured training.

Program coordinators lead the structured training sessions, with one program, SAP, reporting that they also use outside trainers. Despite the different preventive goals and facilitator background of the four programs, the content of the training provided to facilitators is remarkably similar. Frequently covered topics include group dynamics, listening skills, handling problems that arise in the group, working as a team, and specific topics that pertain to the targeted youth, such as the effects of substance abuse. There

are no significant differences in the content of the training provided to volunteer facilitators and that provided to facilitators who have advanced degrees.

Most trainers employ hands-on, experiential techniques in which facilitators prepare for their task through role-plays and mock group sessions. The trainer presents situations, such as how to handle a participant who attempts to monopolize the conversation, and the group discusses or acts out the appropriate response. In addition, facilitators lead their peers through an abbreviated session, then receive feedback on alternative ways of conducting the group.

There are also program guideline and program planning aspects to the training sessions. Program guidelines include providing facilitators with a list of contact persons and telling them how to respond in crisis situations.

Of the five programs examined, the peer-led PGC provided the most extensive facilitator training. This high level of training is due to the fact that the facilitators being adolescents themselves, need the additional preparation. Following the initial training retreat and before they lead groups of participants, the peer facilitators participate in weekly mock sessions conducted by the program coordinator. Among the adult-led programs, the SAP provided the most intensive facilitator training.

Facilitator Supervision

In addition to providing initial training, all programs supervise facilitators, typically through the program coordinator. Observations and group meetings involving all facilitators are the two most common supervision methods. In four of the programs, supervision was done on an occasional basis: program coordinators observe facilitators leading a group, then provide structured feedback following the session. The SAP provides more intensive supervision. The coordinator meets individually once a week with new or less experienced staff, and every other week with experienced staff to discuss the group sessions and the individual students. Not surprisingly, PGC provides its peer facilitators with the most intensive supervision among the study programs. PGC advisors are present during all group sessions and complete an observation form for each facilitator.

All programs also conduct regular group meetings, in which facilitators have an opportunity to exchange ideas and information. In this way, the facilitators function as a peer group themselves, eliciting advice on how to handle problems from peers who may have recently encountered similar situations.

PROGRAM RESOURCES

The estimated cost per participant in the five programs during 1992-93 ranged from approximately $260 for SAP to $4,485 for LAMDP. However, it is difficult to obtain

completely accurate estimates of the cost per participant due to the extensive in-kind contributions accepted and used by the programs, without which the programs would incur significantly higher costs. The ability to accurately estimate costs is further hampered in programs that provide multiple services because they do not separate the costs of the peer group component.

The bulk of program expenditures goes to salaries for program staff, with supplies and equipment representing the next largest expenditure. In-kind contributions include donated space, facilitators for little or no fee, and meals and round-trip transportation for participants. The most important in-kind contributions involve program space. All programs except 12 Together receive office space for program staff free of charge from the sponsoring institution. All programs receive donated space for the peer support groups from either the sponsoring institution or local businesses and churches.

COMMUNITY SERVICE LINKAGES

Because peer support programs cannot provide participants with all the services they need, they rely on other community organizations to augment their efforts. All programs give facilitators a listing of local agencies that provide youth services. Both SAP and MOMS invite representatives of selected agencies to address staff and participants and answer any questions they may have. In addition to helping youth learn more about available community resources, this provides them with a personal contact, making it easier for them to approach the agency in the future should the need arise. Program staff also refer youth to outside organizations, including mental health agencies, substance abuse treatment programs, family planning clinics and public assistance agencies.

VI. INTERNAL MECHANISMS OF THE PEER SUPPORT GROUPS

Peer support group strategies are based on a belief in the power of peer influence to mold adolescent beliefs and behavior. Programs that attempt to use peer group dynamics do so in an effort to reinforce positive norms and attitudes. Group facilitators seek to create a dynamic in which the group members themselves encourage prosocial behaviors, challenge behaviors that are self-defeating or potentially destructive, and suggest alternative strategies for dealing with problematic situations. This chapter examines the extent to which the programs are successful in fostering group processes. It also explores the inner mechanisms of the support groups of the five programs we visited, and the extent to which peer influence is generated within their meetings.

Because observations were limited to one support group meeting in each program, (with the exception of PGC, where two group meetings were observed), it is difficult to determine the extent to which an individual program was successful in generating positive peer influence over the course of its program and the range of its activities. Despite this limitation, we can draw several conclusions regarding the dynamics of peer support groups.

ESTABLISHING RAPPORT

Like adult/youth relationship programs, peer programs are built on a model that requires early self-disclosure from participants. Talking about personal feelings in a group of relative strangers is difficult for anyone, and may be especially so for adolescents, who are often particularly self-conscious and concerned with their status among their peers. Before youth can be comfortable talking about themselves in a group, let alone accept the group's candid feedback and suggestions for behavioral change, they must feel accepted. Thus, establishing an atmosphere of trust and openness within the group is a primary task for a peer support program.

Four of the five programs we visited spend considerable effort building a positive group dynamic. They do so by devoting the early part of the program to "icebreakers"[2] and trust-building activities, which are designed to develop openness and cohesion among members of a group. For example, one SAP facilitator reported that she spends the first four to six weeks of a semester-long program cycle doing trust-building activities so a

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[2] "Icebreakers" are activities designed to allow a nonthreatening, fun way of sharing personal information, experiences, values, and so on. One such activity might be an exercise where group members are paired off and each must "interview" their partner and introduce him or her to the group. Trust-building activities often require group members to assist one another in performing a (sometimes scary) physical feat that would be impossible to do alone, such as climbing over a high wall. Group members must rely on one another's assistance to successfully complete the task.

group will develop the kind of dynamic that can support the youth's commitment to reducing their substance abuse levels, a commitment they are required to make later in the program.

Two other programs--PGC and 12 Together--run initial retreats for participants, ranging from one to three days in length. These retreats have similar goals and activities, and are held in a camp or other special site where the youth and facilitators can spend a large block of uninterrupted time together. In addition to acquainting the participants with the program, these retreats are packed with activities designed to build trust and cohesion among the group members and between the group and their facilitators.

Because of their intensity and their "away from the world" quality, retreats are effective in breaking down social barriers among relative strangers in a short period of time. The staff of 12 Together reported that the weekend retreat greatly facilitated the group bonding process. One facilitator stated that because of the trust and commitment established at the retreat, the youth came to their first meeting as a cohesive group. More important, the youth seem to enjoy the retreats. During our observation of a full day of activities in the PGC peer leaders' retreat, the youth were actively engaged in and appeared to enjoy the several icebreakers and trust-building activities that made up the day.

Devoting time to building a positive group dynamic at the beginning of the program may be critical to a program's subsequent success in getting youth to open up to one another. Consider that LAMDP, the program that did not include such initial group-building activities, reported the least success in fostering open discussion among the youth in the small-group sessions.

In addition to using trust-building activities to develop a sense of safety and trust within the group, all programs had some sort of "ground rules" governing behavior within the sessions. The most important ground rule was confidentiality--nothing that a youth said in the group meetings was to go outside of the group. This rule was strictly maintained by all programs; breaking confidentiality was generally considered grounds for being asked to leave the group.

DISCUSSING PERSONAL ISSUES

Central to the success of a support group is the participants' willingness talk about substantive personal concerns with fellow group members. Through our interviews and observations of group meetings, we found that while youth are willing to talk about certain personal issues to some extent, they are particularly reluctant to discuss their more serious personal or family problems in a group setting.

For example, one 16-year-old male member of the SAP substance abusers' support group said that while it was easy for him to talk about his substance abuse-related behaviors

with the group, because "most of us are doing this anyway," it was harder for him to talk about his family-related problems. His comment was consistent with our observation of a SAP group meeting in which the group members recounted tales of their own, their friends, or their family's substance abuse behaviors, but were unable or unwilling to explore their feelings about these episodes or reflect on their underlying causes and consequences.

A participant of the 12 Together program reported that while she herself felt comfortable talking about anything once she warmed up to the group, she felt that other group members were reluctant to bring up really serious problems in the group, and preferred instead to focus on less serious issues. Indeed, in the session we observed, the discussion centered around sibling rivalry. And having a peer facilitator does not seem to increase youth's willingness to disclose serious personal problems to the group. The youth we spoke to in the peer-led PGC program reported feeling more comfortable discussing issues concerning friendships and relationships with the opposite sex than personal problems and family situations.

The MOMS program was the only program in our review in which disclosure seemed strong. The two young mothers we interviewed claimed they felt free discussing anything in the group, and this was confirmed by our observations of a group session that was dedicated to a discussion of family problems during the holiday seasons, and during which one young mother talked about the death of her child the previous year. Their comfort in discussing such personal matters could be the result of two factors: the length of time they had been meeting as a group (over two years), and their age--being in their early 20s, they are considerably older than the youth in the four other peer programs.

These findings suggests that self-disclosure in a group context may be difficult for youth under 20 regardless of a program's efforts to build an accepting, supportive atmosphere. Revealing highly personal information may not characterize naturally occurring peer group interactions at this age. Adolescents may prefer to talk about their problems with an intimate friend rather than in a group context, where face-saving and status concerns are present. The intense need of youth in this age group for peer acceptance and the equally intense fear of peer ridicule and rejection may make youth more reluctant to expose a vulnerable side to a group of peers.

Thus, the willingness of the MOMS members to disclose personal problems may reflect a change in the nature of peer relationships that characterizes early adulthood, and suggests that this model may work best with those past high school age. Younger adolescents apparently feel more comfortable discussing issues that are common to all teens in which they can control the amount of personal information they volunteer.

Interestingly, both the PGC and the SAP participants said that they like to meet with their facilitator individually outside of the group meeting to discuss more pressing personal problems. It may be that youth at this age feel that the confidentiality and

privacy of a one-to-one conversation with a trusted adult or youth mentor offers a safer context to discuss personal concerns. This suggests that peer group interventions and interventions based on one-to-one relationships fulfill different needs; they can complement, but not replace one another.

Youth's reluctance to bring serious personal problems to group discussions may limit the usefulness of peer support group programs as an intervention or prevention strategy with high-risk youth, as the support group process may be unable to resolve the underlying situations and problems that lead young people to become involved in drugs and other problem behaviors.

DEGREE AND NATURE OF PEER INTERACTION

According to the model of peer influence on which these programs are based, behavioral and attitudinal changes are expected to come about through the give and take of group discussions, as group members challenge, support, and guide one another. How successful are the programs in implementing this type of peer exchange? To what extent and through what mechanisms do peers influence one another in support group meetings?

When asked to describe the ways in which youth interact in the group meetings, the facilitators and participants in three of the programs (MOMS, 12 Together, SAP) reported high levels of group interaction. According to their descriptions, group members exchange information (e.g., about community resources) and correct each others' misinformation (e.g., about the consequences of substance abuse); they challenge each other's behavior ("Why did you do that?"), and "bring each other into line"; and they support, encourage, and "look after each other." When one member presents a problem to the group, the others offer specific advice, and the youth is asked to report to the group what happened when he/she followed that advice.

Facilitators from two of the programs described instances in which group pressure was used to influence an individual's behavior. The SAP facilitator reported that when one group member was arrested for marijuana possession and suspended from school, he ran away from home and could not be located. In response, the group got together and sent a message to him encouraging him to seek one of them out for help, which he did.

The 12 Together facilitator reported that youth often report on each other's school or other outside behaviors in the group meetings. (This is part of what is expected of them: the youth take a pledge at the initial retreat to "watch out for each other inside and outside of the group.") For example, one facilitator said that a group member will sometimes report on another member when she asks whether anyone skipped school that day. However, she emphasized that this is done in a very supportive atmosphere, "with the understanding that the purpose is to get the group member to own up to and deal with his or her behavior--'I told on you because I am trying to help you. You know what

you did.'" She added that the youth report on each other's accomplishments as well, by saying, for example, "Why didn't you tell us about the award you got in school?"

Thus, from the point of view of the facilitators, group members do support and influence one another in positive ways. However, our observations of group meetings were not entirely consistent with this description; overall, we found rather low levels of group discussion and peer interaction during the group meetings. We observed a total of six group sessions--one for four of the programs and two for PGC. In three of the six sessions, we observed some positive peer interaction; in the other three, we observed little peer interaction. The following sections describe our first-hand observations of sessions.

MOMS. In the session we observed, MOMS proved exceptionally strong: the session consisted entirely of discussion among the group members. The young mothers set the agenda and generated the discussion topics. As they talked about the stress they were experiencing around the Christmas holiday season, the young mothers offered each other support, and suggested strategies for making stressful situations less draining, as well as ways to deal with stress without taking it out on their children. When one of the mothers began to cry as she spoke of the anniversary of the death of her baby, the other mothers responded with support and comfort. In an exchange of stories about problems they encountered in dealing with the social welfare system, one mother offered the group the name of a caseworker who had been particularly helpful to her. The facilitator needed to do little to keep the discussion going.

Twelve Together. In the 12 Together session, we observed several instances of peer influence, but on the whole, the facilitator dominated the session. According to the model developed by the program, the leader is to guide the group through a specific sequence of steps in which the youth themselves choose a member's problem to be the topic of discussion, then ask questions to illuminate the conditions of the problem and derive concrete suggestions for a solution. However, it was the facilitator who asked the questions that formed the bulk of the 90-minute session--questions that probed the causes and consequences of the sibling rivalry between twin brothers and questions that asked the youth to assess their academic progress.

On occasions when the facilitator did solicit the group's reaction, she was quite effective in getting the youth to give feedback, to challenge each other's attempts to avoid responsibility for their behavior and to suggest solutions to problems. Notes from the observation of this session are included here to illustrate the insight, support and humor that characterized these peer exchanges:

> As the twins answered the facilitator's questions concerning their mutual rivalry, the other group members listened attentively and occasionally responded with comments:

"It sounds like you are jealous of your brother or something... I can understand that because I have a brother, too."
"It's normal! this happens in every family!"
"It's both of your faults!."

Although the twins rejected the group's advice as often as not, the suggestions from the peer group were still effective in moving the twins toward a solution. When the twins rejected a piece of advice, the facilitator pressed the twins to come up with their own solutions. The facilitator's skillful use of peer suggestions led the twins to arrive at an admission of responsibility for their problem ("I have been a pain in the neck.") and a possible solution ("I could sit down and talk to him about it.").

Thus, while she dominated the group meeting far more than the 12 Together model recommends, this facilitator was able to use peer influence to resolve some of the youth's problems.

PGC. In one of the two PGC sessions we observed, there was a high level of group interaction as the youth carried on an activity requiring them to guess the identities of fellow group members from written clues. However, while youth could become better acquainted with each other through this activity, there was little opportunity for them to discuss common interests, respond to each other's personal experiences and opinions, or influence each other's thinking or behavior. In the other session, the youth were involved in an activity that required them to respond to questions in turn. However, because the peer leaders did not try ask the youth to react to each other's responses, and did not initiate any follow-up discussions centered on individual responses, this activity generated little peer interaction of any kind.

LAMDP. The facilitator of the LAMDP meeting was not able to generate group discussion in the various activities that made up the session. He called on individuals to answer several questions concerning self-esteem and nonviolent behavior, and asked individuals to voice their opinions on several issues. However, he did not attempt to get the youth to respond to one another; thus, the exercises generated virtually no peer interaction.

SAP. Our observations of the SAP group session were more difficult to interpret. The youth in this group, all of whom had serious substance abuse problems, were asked by the facilitator to choose and comment on a phrase that was personally meaningful to describe the negative consequences of drug and alcohol abuse. One by one, the youth began to recount episodes of their own, their friends' or their parents' excessive substance abuse or intoxicated behavior. Despite the facilitator's repeated attempts to get the youth to reflect on their own feelings and the consequences of such behavior, the session quickly turned into a series of "war stories," told by the youth with considerable bravado, with the listening group members offering few comments and little challenge to their peers' stories. Our observations add support to the findings of Feldman et al.

(1987) concerning the importance of including youth who do not engage in problem behaviors in peer support groups designed for youth who do engage in the behaviors, so they can challenge and provide alternatives to the behaviors. Our observations also pointed to the importance of strong facilitator skills in groups of high-risk youth. Because the facilitator was unable to control the flow of the discussion, and few challenges were offered by the peers, this session ran the risk of reinforcing the very behaviors and attitudes the program seeks to reduce.

In sum, the five programs in this study met with varying success in generating positive peer influence in the group meetings. There was also some discrepancy between our observations and the facilitators' descriptions regarding the level and quality of peer interaction in the group meetings; this may partly result from the disruption caused by our presence at the meetings. However, it might also be due to the fact that the facilitators are unaware of the degree to which they dominate discussions, and that the youth interact with them far more than they do with each other.

The high levels of open discussion and positive interaction that we found in the MOMS group suggest that the model works best with youth in their early 20s, and may require more time for trust to develop than most programs can provide. The comparative difficulty of the other programs in generating peer interaction and discussion suggests that self-disclosure in a group setting is not easy for most younger adolescents, despite their preference for peer groups as a context for recreational and other activities. Younger adolescents may lack the cognitive maturity to engage in the kind of sustained, reflective analyses on which support group discussions depend. Because of these factors, these groups require facilitators with highly developed skills, who are able to generate discussion among the youth without dominating or losing control of it. Unless the youth are given opportunities to react and respond to one another, it is difficult to see how mechanisms of peer influence can be effectively mobilized in these programs.

VII. CONCLUSIONS AND RECOMMENDATIONS

This chapter summarizes our findings on the effectiveness of peer support groups, identifies applications for which the model seems to hold the most promise, and gives recommendations for the selection, training and supervision of effective facilitators.

THE PROMISE OF PEER SUPPORT GROUP PROGRAMS

There is little hard data with which to judge the effectiveness of the five programs reviewed in this report, since the programs do not collect the kinds of systematic data that lend themselves to tracking program effects. Three of the five programs have undergone evaluations by an outside party, but these studies suffer from serious methodological flaws that make it impossible to attribute positive findings to program effects. While impact analyses could help illuminate the power of this model as an intervention or prevention strategy, the findings of the present study suggest that peer support groups alone may have limited power to prevent or reduce problem behavior in high-risk youth.

Substance abuse and other high-risk behaviors are caused by a combination of psychological, family, cultural, and economic factors. Our study has shown that adolescents are reluctant to discuss some serious problems that emerge from these underlying factors in a group setting, thus limiting the capacity of the peer support group to address these problems. This suggests that peer support groups may not replicate naturally occurring peer processes, and thus may not be able to manipulate peer influence in the desired direction. In fact, our observation of peer interactions within the group meetings suggests that before their early 20s, adolescents may lack the cognitive and emotional maturity needed to generate the kind of reflective and probing discourse that should characterize support group discussions.

Despite these findings, however, our interviews with program staff and participants reveal two important ways in which these programs benefit the youth they serve.

First, the support groups provide participants with a source of social and psychological support that may be otherwise lacking in their lives. When asked to consider program benefits, there was general consensus among participants and staff that the youth gain a sense of acceptance and understanding from their groups. Several youth spoke with great emotion of the fellowship and support they receive. They described their groups as being "like a family." Others reported that the group meetings gave them a chance to talk and be heard. As the two SAP participants reported, "[The group meeting] is the only time I get to talk to somebody." "It feels good to get stuff off of your chest."

Describing both the sense of social isolation that she felt as a teenage mother and the support that she got from her MOMS group, one young mother said that she lost many

of her friends once she became pregnant, but the group gave her the opportunity to be with other young women who were going through experiences similar to her own. Similarly, one SAP participant reported feeling "tattooed for life" after being placed in a group home, but claimed that as a result of the program, he realized that "things could turn around." A few youth attributed their ability to make positive changes in their lives to the support they received from the group. A MOMS participant claimed that the support she received from the group gave her the drive and courage to finish her high school education.

Second, the programs seem to improve the youth's ability to deal with everyday problems. A participant of the LAMDP reported that his discussion group showed him "how to get out of a situation without being violent." The facilitator and the participants of the MOMS program felt that the young women gained valuable parenting skills and tips on how to behave at the workplace. A freshman from the PGC reported that the group meetings helped her handle certain problematic situations. Thus, through guided discussions of the daily problems and conflicts--whether based on hypothetical or actual situations--peer support groups provide youth with practice in problem-solving and critical thinking and offer practical suggestions for negotiating better relationships with family, peers, and teachers.

In sum, peer support groups, in and of themselves, may have limited power to affect how youth handle such serious problems as substance abuse, school failure, teen pregnancy and delinquency. However, given the groups' power to provide youth with a sense of social connection and self-worth, as well their potential to improve their coping skills, we believe that well-implemented peer support groups may be a useful addition to programs whose goals include the following:

- Skill-building. Peer support groups could be incorporated into programs that seek to improve specific skills, such as critical-thinking, problem-solving, coping, parenting and interpersonal skills. As discussed earlier, well-facilitated group discussions of actual or hypothetical situations that call on youth to reflect on their own and others' behavior and experiences and to seek alternative strategies to solve problems appear to be an effective way of improving a variety of survival skills.

- Team-building. Programs that seek to increase understanding and tolerance among youth of diverse backgrounds, and programs built around cooperative group activities might benefit from peer support group techniques. Peer support group programs have generated a variety of well-developed activities and processes designed to forge cohesion and trust among group members and aid them in communicating, understanding and appreciating one another.

- Decreasing social isolation. A sense of isolation, of being alone with a problem, is often a correlate of such situations as teen parenthood, sexual abuse, residential

placement, and homelessness. Sharing such experiences within the accepting atmosphere of a group of peers who share those experiences may help attenuate the feelings of shame and loneliness that can exacerbate such problems.

- Supporting behavioral change. While peer support groups may not be powerful enough to effect lasting change, they seem to be one promising component that could be used in a broader intervention initiative incorporating multiple strategies to produce behavioral and attitudinal changes.

RECOMMENDATIONS

Consistent with the findings of Feldman et al. (1987) and Eggert and Herting (1991), we found that the group facilitator is key to the success of any peer support group. Aside from his or her role in facilitating group interaction, the facilitator is perceived by the youth as a mentor, confidante and role model; as such, he/she is in a position to exert considerable influence. The youth in all programs spoke highly of their facilitators. Freshmen in the PGC sought out their peer facilitators during the school day and confided in them, and emulated them by, for example, wanting to be peer leaders when they themselves became seniors.

Some 12 Together facilitators continue to keep in touch with youth in their group after the program ends, thus extending their support and influence far beyond programmatic requirements. The young women in MOMS spoke appreciatively of their facilitators, and interpreted the fact that facilitators were unpaid volunteers as a sign of a genuine commitment. The SAP youth sought out their counselor for individual counseling and appreciated her humor and acceptance.

Clearly, the facilitator is part of the process, and the affection, understanding, care and guidance he or she provides as an adult or older peer complements and augments the support the youth receive from the peer group.

Our observations also suggest that facilitating group discussions and guiding positive peer influence without dominating or losing control of the group requires considerable skill and talent. Thus, in order to maximize the effectiveness of any peer support group, we make the following recommendations concerning the selection, training, and supervision of group facilitators.

Facilitator selection. While professional counselors can be excellent and effective group facilitators, our observations lead us to conclude that choosing facilitators who are "close" to the youth, either in terms of age, cultural or ethnic background or life experiences might be more effective than selecting based solely on professional credentials. The power of the facilitator to influence the youth might be maximized if the youth see the leader as an example of what he or she could become. A PGC freshman's expressed

desire to become a peer group leader when she became a senior--a role that requires the senior to adopt exemplary behavior throughout the school day--is a case in point.

Selecting a group leader who has overcome the very difficulties group members are struggling with may be especially important in support groups for youth involved with substance abuse or other problem behaviors. Peer norms supporting these problem behaviors may be strong within the group, and as we observed in the SAP program, there is a tendency for youth to reinforce these norms through bravado accounts of their risk-taking behavior. A facilitator who has experienced and overcome these serious problems might be more credible and thus more effective than a facilitator with no such experience. In addition, such a facilitator might be able to challenge the youth's bravado and convince them of the real danger of their behavior, while showing them that such problems they can be overcome.

Facilitator training and supervision. Our observations of group meetings revealed that it is easy for these sessions to evolve into dyadic question-and-answer exchanges between the facilitator and individual group members, with the other members listening, but not commenting. To generate constructive peer influence in group meetings, the facilitator must be skilled in eliciting the group members' comments and responses and processing the information generated in the discussions so that the youth can analyze, and possibly resolve issues themselves. They must guide the youth to challenge misinformation and attempts at denial without imposing their own opinions and judgements.

Peer leaders who are adolescents themselves may lack the cognitive maturity and analytic skills to ask the types of probing, analytic questions designed to promote group discussion and problem-solving. Adult leaders may find it difficult to relinquish their customary role of providing advice and guidance to youth, tendencies which run counter to the facilitator's task of helping the youth guide one another. To develop skills in facilitating group discussions, programs should provide both initial training and ongoing supervision. Training sessions should include opportunities to practice these skills in simulated situations, with feedback from the trainer and/or other facilitators.

After initial training, ongoing supervision should be provided at frequent intervals, and should be focused on specific dynamics within the group--particularly on how well the facilitator is able to generate and guide group discussions. Optimally, supervisors should observe the facilitator leading his or her group, then provide concrete, constructive feedback concerning the facilitator's strengths and weaknesses. Because of their relative lack of experience and maturity, peer facilitators should receive ongoing, intensive training and close supervision and support.

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APPENDIX A

Participant and Facilitator Characteristics

	PROGRAM				
	Student Assistance Program	**Twelve Together**	**MOMS**	**Louis Armstrong Manhood Development Program**	**Peer Group Connection**
Participants					
DESCRIPTION	Students with or at risk of substance abuse problems	At-risk and low-risk students	Young, pregnant women and new mothers	Young, urban males	High-school students
TOTAL NUMBER	859	89	32	55	350
GRADE/AGE	Sixth to 12th grades	Eighth and ninth grades	12 to 22 years	Eight to 16 years	Ninth-graders
RACE/ETHNICITY	White - 93% African-American - 5% Hispanic - 1% Other - 1%	White - 2% African-American - 97% Hispanic - 1%	White - 33.3% African-American - 33.3% Hispanic - 33.3%	All African-American	Mostly African-American
GENDER	Female - 68% Male - 32%	Female - 26% Male - 74%	All female	All male	Approximately 50% male; 50% female
Facilitators					
TOTAL NUMBER	12	11	2	2	26
BACKGROUND/ EXPERIENCE	Certified social workers with Master's degree	Community volunteers	Former teenage mothers and other community volunteers	Educators and certified social workers with Master's degrees	High school seniors
RACE/ETHNICITY	White - 92% African-American - 8%	White - 9% African-American - 91%	White - 70% Latina - 20% African-American - 10%	All African-American	Mostly African-American
GENDER	All female	Female - 64% Male - 36%	All female	All male	Female - 62% Male - 38%
FULL- OR PART-TIME	Full-time	Part-time	Part-time	Part-time	Part-time

APPENDIX B

Program Characteristics

	PROGRAM				
	Student Assistance Program	**Twelve Together**	**MOMS**	**Louis Armstrong Manhood Development Program**	**Peer Group Connection**
Characteristic					
PROBLEM AREA	Substance abuse	School failure	Teenage motherhood	Youth violence	Transition to high school
ORGANIZATIONAL STRUCTURE	School-based	Community-based	Community-based	Community-based	School-based
PEER VS. ADULT-LED MODEL	Adult-led	Adult-led	Adult-led	Adult-led	Peer-led
Peer Group Meetings					
FREQUENCY	Weekly	Weekly	Weekly	Four days/week	Weekly
DURATION	50 minutes	Two hours	Up to three hours	One hour	50 minutes
NUMBER OF PARTICIPANTS PER GROUP	5 to 12	12	8 to 15	10 to 12	12 to 15
NUMBER OF FACILITATORS PER GROUP	1	2	2	2	2

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